EPA	United States Environmental Protection Agency Washington, DC 20460 Work Assignment				Work Assignment Number 2-06  Other Amendment Number:			
Contract Number   Contract Period 10/01/2014 To 09/30/201					Title of Work Assignm	mant/SE Sita Nam		
EP-D-14-031				2017				
EP-D-14-U31 Base Option Period Number 2 SUPPORT FOR OTAQ COMPLIANCE D  Contractor Specify Section and paragraph of Contract SOW								
INDUSTRIAL ECONOMICS, INCORPORATED								
Purpose: X Work Assignment					Period of Performance  From 10/01/2016 To 09/30/2017			
Comments: THE PURPOSE OF THIS ACTION IS TO APPROVE THE CONTRACTOR'S WORK PLAN AND BUDGET DATED OCTOBER 20, 2016 FOR A NOT TO EXCEED AMOUNT OF \$32,637.63 AND 229 LOE HOURS. ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED. THIS WORK DOES NOT DUPLICATE ANY WORK PREVIOUSLY APPROVED UNDER MY AUTHORITY.								
Superfund Accounting and Appropriations Data X Non-Superf							Non-Superfund	
SFO (Max 2)  Note: To report additional accounting and appropriations date use EPA Form 1900-69A.								
ı e	ropriation Budget Org/Code le (Max 6) (Max 7)	Program Element (Max 9)	Object Class (Max 4)	Amount (Do	iliars) (Cents)	Site/Project (Max 8)	Cost Org/Code	
1								
2								
3								
4					-			
5					-			
Authorized Work Assignment Ceiling								
Contract Period: Cost/Fee: \$0.00 LOE: 0								
10/01/2014 To 09/30/2017 This Action: \$32,637.63					229			
Total: \$0.00								
Work Plan / Cost Estimate Approvals								
Contractor WP Dated: 10/20/2016					LOE: 229			
Cumulative Approved: Cost/Fee \$0.00					LOE: 0			
Work Assignment Manager Name Staci Gatica					Branch/Mail Code:			
ANOLY Media Malishe Malie Oract Cartra					Phone Number: 202-343-9469			
(Signature) (Date)					FAX Number:			
(Signature) (Date)  Project Officer Name Lorraine Reddick				_				
report ment belauted from the first					Branch/Mail Code:			
					Phone Number: 202-564-1293			
(Signature) (Date)					FAX Number:			
Other Agency Official Name					Branch/Mail Code:			
					Phone Number:			
(Signature) (Date)  Contracting Official Name Andrew Flynn					FAX Number:			
					ch/Mail Code:			
12-12-16					Phone Number: 919-541-2674  FAX Number: 919-541-0611			
(Signature)		(Date)		FAX	Number: 919-54	#T-APTT		